

Giving Tree 2018



Need Request Application*

*Priority will be given to 1st time applicants. Submission of application doesn't guarantee approval in the program. Recipient will be notified of application status via e-mail by 11/22/18.

Please print neatly. All information kept confidential. Any Questions? Call Megan at (607) 763-6268

Name of Person/Family in need (primary person, or both people if a couple) **Sizes required! Gift ideas/interests. Be specific.**

Dependent in need Sex Age **Sizes required! Gift ideas/interests. Be specific.**

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Did you receive help in the past? Yes No
Specific Cause(s) of Need this year? _____

UHS Connection of recipient (employee, retiree, family member, physician): _____

Credit Union Member, or family of Credit Union Member (doesn't affect eligibility)? Yes No

Referring person (unless same as person in need): _____ Cell # _____

Recipient Email: _____ **(Required)** Relationship to person(s) in need: _____

Gift pick-up dates are December 14th, 1:00pm to 4:00pm, and December 17th, 8:00am to 10:00am.

The Person or Family who is receiving the gifts will need to pick them up during the dates and time above. Please list their contact information below. **Photo Id will be required when picking up.**

Name: _____ Cell # _____ Best time to call _____

Anything else we should know?